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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐

Declaration
Submitted
with Initial
Filing

OR

☐

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number

44838

First Named Inventor

JAIN, Ravinder K. et al.

COMPLETE IF KNOWN

Application Number

Filing Date

Art Unit

Examiner Name

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**OVEREXPRESSION IN YEAST AND PLANTS OF A GENE ENCODING GLYCEROL
3-PHOSPHATE ACYLTRANSFERASE**

(Title of the Invention)

the specification of which

☐

is attached hereto

OR

☒

was filed on (MM/DD/YYYY)

06/20/2000

as United States Application Number or PCT International

Application Number

PCT/CA00/00738

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/>		Customer Number or Bar Code Label		OR <input type="checkbox"/>		Correspondence address below	
EDWIN J. GALE KIRBY EADES GALE BAKER Name							
P.O. BOX 3432, STATION D Address							
OTTAWA City			ONTARIO State		K1P 6N9 ZIP		
CANADA Country		613-237-6900 Telephone			613-237-0045 Fax		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR :				<input checked="" type="checkbox"/> A petition has been filed for this unsigned inventor			
RAVINDER K. Given Name (first and middle [if any])				JAIN Family Name or Surname			
Inventor's Signature						Date	
OTTAWA Residence: City		ONTARIO State		CANADA Country		CANADIAN Citizenship	
1000-60 QUEEN STREET Mailing Address							
OTTAWA City		ONTARIO State		K1P 5Y7 ZIP		CANADA Country	
NAME OF SECOND INVENTOR:				<input checked="" type="checkbox"/> A petition has been filed for this unsigned inventor			
SAMUEL L. Given Name (first and middle [if any])				MACKENZIE Family Name or Surname			
Inventor's Signature						Date	
SASKATOON Residence: City		SASKATCHEWAN State		CANADA Country		CANADIAN Citizenship	
17 CAMBRIDGE CRESCENT Mailing Address							
SASKATOON City		SASKATCHEWAN State		S7H 3P9 ZIP		CANADA Country	
<input type="checkbox"/> Additional inventors are being named on the ____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							